PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandra, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

indicated unless corrected maintenance fee notificati		erwise in Block I, by (a	i) specifying a new corres				
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
23409	7590 07/21	/2010	nave	e its own certificate t	of maining of transmission.		
	ST & FRIEDRIC SIN AVENUE	H LLP	е	lectronically file	ed		
MILWAUKEE,	WI 53202		□ R	obyn O'Neill		(Depositor's name)	
				/robyn o'neill/		(Signature)	
				October 8, 2010	<u> </u>	(Date)	
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		
10/563,046			Michael Weiler		022862-1082-00	6075	
TITLE OF INVENTION:	WINDSHIELD WIPIN	IG DEVICE FOR A MOT	FOR VEHICLE				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUI	E DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	10/21/2010	
EXAMI	NER	ART UNIT	CLASS-SUBCLASS				
GRAHAM, GARY K		3727	015-250310				
 Change of correspondence address or indication of "Fee Address" (CFR 1.363). Change of correspondence address (or Change of Corresponde Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custon Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 Michael Best & Friedrich LLP				
PLEASE NOTE: Unla recordation as set forth (A) NAME OF ASSIC Robert Bosch	ess an assignee is ident n in 37 CFR 3.11. Comp GNEE GMbH	ified below, no assignee pletion of this form is NO	(B) RESIDENCE: (CITY Stuttgart, Gern	atent. If an assigne assignment. ' and STATE OR CO	DUNTRY)	document has been filed for	
☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form Tro-2030 is attached. The Director is hereby authorized to charge the required reces, any deficiency, or credit any overpayment, to Deposit Account Number 13-3080 (enclose an extra copy of this form).				
5. Change in Entity Stat	cus (from status indicate s SMALL ENTITY state		☐ h Annligent is no lon	gor claiming SMAI	L ENTITY status. See 37 (TFR 1 27(a)(2)	
	Publication Fee (if rea	uired) will not be accepte	d from anyone other than t	-		the assignce or other party in	
Authorized Signature /david r. price/			Date October 8, 2010				
Typed or printed name David R. Price			Registration No. 31,557				
Alexandria, Virginia 223	15-1430.		on is required to obtain or a 1.14. This collection is est to be depending upon the individual collection office COMPLETED FORMS TO spond to a collection of infection of infection of infection of infection of infection of infection in the collection of infection of infection of infection in the collection of infection in the collection of infection in the collection of infection of infection in the collection in the collecti			nd by the USPTO to process) ing gathering, preparing, and time you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450, ol number.	